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PTO/SB/21 (08-00)
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IPE		Application Number	09/639,27	73 ′		
TRANSMITTAL	Filing Date	August 1	5, 2000	/E		
L 2 9 2002 gg FORM	First Named Inventor	Michael A	A. Innis et al	<u></u>		
(to be used to all correspondence after in	Group Art Unit	1646				
TRADEMAIL	Examiner Name	Eliane Lazar-Wesley				
otal Number of Pages in This Submission		Attorney Docket Number	012441.0	0002	<u>a</u>	
	ENCLO	OSURES (check all that apply)				
⊠ Fee Transmittal Form		ment Papers Application)	1 —	After Allowance Communication to Group		
Fee Attached	☐ Drawin	g(s)		l Communication to Book and Interferences	oard of	
Amendment / Response	Licensi	ing-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final	Petition	1		etary Information		
☑Declaration Under Rule 132 (unexecuted) (w/Exhibits 1-4)	_	n to Convert to a onal Application	☐ Status	Letter		
∑ Extension of Time Request		of Attorney, Revocation e of Correspondence Address		Enclosure(s) identify below):		
Express Abandonment Request	_	al Disclaimer				
	☐ Reque	st for Refund				
Information Disclosure Statement	CD, Ni	ımber of CD(s)				
Certified Copy of Priority Document(s)	Rema	rks				
Response to Missing Parts/ Incomplete Application						
Response to Missing Parts under 37 CFR 1.52 or 1.53						
SIGNA	TURE OF	APPLICANT, ATTORNEY, C	R AGENT			
Firm or Individual name Michelle L. Holmes-Son, Reg. No. 47,660						
Signature Will Qa. Y. Hama A						
Date July 29, 2002	·	·				
	CE	RTIFICATE OF MAILING				
I hereby certify that this correspondence is				first class mail in an e	envelope	
addressed to: Assistant Commissioner for	Patents, W	ashington, D.C. 20231 on this da	ate:			
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FEE TRANSMITTAL'' &	<u> </u>	Complete if Known	\Box	
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for FY 2002 JUL 2 9 2002	Pling Date	August 15, 2000	>	20
\ 3	Bst Named Inventor	Michael A. Innis et al		-
Patent fees are subject to annual revision	xaminer Name	Eliane Lazar-Wesley	TH.	Ş
☐ Applicant claims small entity status. See 37	Group / Art Unit	1646	0	UG
TOTAL AMOUNT OF PAYMENT (\$) 110	Attorney Docket No.	012441.00002	#	<u> </u>

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Dep			5 1451 - F 1 1 4			139	130	139	130	Non-English specification	<u> </u>	
Nan	ount	Banner	& Witcoff, Ltd.			147	2,520	147	2,520	For filing a request for reexamination	ļ	
1						112	920*	112	920*	Requesting publication of SIR prior to Examiner action	İ	
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⊠ Chai	ge lee(s)	ditional fe	e(s) during t	he pendency of	this application	l''°	1,040		1,040	Examiner action	İ	
☐ Chai	ge fee(s)	indicated t	below, excep	ot for the filing		115	110	215	55	Extension for reply within first month	110	5
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		F	EE CALCUL	ATION						month	<u> </u>	_
1.	BASIC FI	LING FEE				117	920	217	460	Extension for reply within third month	<u> </u>	_
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Code		Code (\$		escription	Fee Paid	128	1,960	228	980	Extension for reply within fifth month		
101			•	iling fee		119	320	219	160	Notice of Appeal		
106	330	206 16	65 Design	filing fee		120	320	220	160	Filing a brief in support of an appeal		
107	510	207 25	55 Plant f	iling fee		121	280	221	140	Request for oral hearing	\perp	
108				e filing fee		138	1,510	138	1,510	Petition to institute a public use proceeding		
114	160	214 80	U Provisi	ional filling fee		140	110	240	55	Petition to revive - unavoidable		
		SUB	TOTAL (1)		(\$) 0	141	1,280	241	640	Petition to revive - unintentional		
						142	1,280	242	640	Utility issue fee (or reissue)		
2. EXT	RA CLAII	M FEES				143	460	243	230	Design issue fee		
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Total Clair	ns 🗀	•	* = 0	×	= 0	122	130	122	130	Petitions to the Commissioner	<u> </u>	
Independe	nt		. [_			123	50	123	50	Processing fee under 37 CFR 1.17 (q)	·	_
Claims			* = 0	×	_ =	126	180	126	180	Submission of Information Disclosure Stmt		
Multiple Dependent				x	= 0					Recording each patent assignment		
Large E		, Small	Entity	<u></u>		581	40	581	40	per property (times number of properties)		
Fee	Fee	Fee	Fee Fa	e Description		146	740	246	370	Filing a submission after final rejection	·├	
Code 103	(\$) 18	Code 203	(\$) <u></u> 9 CI	aims in excess of	F 20	149	740	249	370	(37 CFR § 1.129(a)) For each additional invention to be	\vdash	
103	84	203		dependent claims		145	740	245	3/0	examined (37 CFR § 1.129(b))	ĺ	
104	280	204		-	claim, if not paid	179	740	279	370	Request for Continued Examination (RCE)		
109	84	209		Reissue indepen	dent claims over	169	900	169	900	Request for expedited examination	\vdash	\dashv
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**or nu	mber pre	viously paid	d, if greater;	For Reissues, s	ee above							

SUBMITTED BY				Co	mplete (if applicable)	
Name (Print/Type)	Michelle L. Holmes-Son	Registration No. Attorney/Agent)	47,660	Telephone	(202) 508-9100	
Signature	Wiely O.	1 Almes-La		Date	July 29, 2002	